

**2015-2016 Expense Report Form  
& Verification Form**

Quarter:

Student Name	
Parent Name	

**REMINDER: A portion must be spent every quarter and must equal 25% of yearly award**

**Private School Tuition**

Name of School #1:	
Tuition Amount*	\$
Name of School #2:	
Tuition Amount*	\$

\*Tuition amount is only what is charged to the ESA debit card and must fall within the dates of the quarter submitted.

**Fees Assessed By the Private School\***

Fee Name:	\$	Fee Name:	\$
Fee Name:	\$	Fee Name:	\$
Fee Name:	\$	Fee Name:	\$

\*All fees must be itemized on the attached invoice and recorded here individually.

**Textbooks REQUIRED By a Private School**

	\$
	\$

**Verification Form**

Pursuant to Arizona Revised Statutes § 15-2402 & 15-2403, as the ESA contract holder, I certify that:

- 1) All funds have been spent for the lawful benefit of the qualified student as authorized in Section 3 of the Empowerment Scholarship Agreement.
- 2) I understand that the Arizona Department of Education is authorized to audit all expenditures and may:
  - a. Suspend an ESA account or remove a parent for misspending;
  - b. Require repayment of misspent funds before releasing additional monies;
  - c. Refer gross misspending for further investigation to the Attorney Generals' Office that may result in a civil judgment or criminal indictment.
- 3) I understand it is a violation of ESA policy to retain the services of a family member or ESA card holder as a therapist, tutor or aide.

\_\_\_\_\_  
Signature of Card Holder

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Name